

Five-Year Review Acknowledgment Of Choice Form

Dear Faculty Member:

After signing and dating below, please immediately send this form to your department chair or, if you are located at one of the regional campuses, to your regional campus dean. The department chair/regional campus dean will sign and submit the form to Faculty Affairs not later than **February 1, 2026**.

I acknowledge receipt of the enclosed information in regards to my five-year review and my tenure time-line. I am aware that I must choose between submitting a dossier for a five-year review in 2026 <u>or</u> I may waive the five-year review in favor of submitting a dossier for tenure later in 2026. My choice is recorded below.

☐ I will submit a Five-Year Review dossier by the deadline specified by my department/regional campus (Dean's Office due date 2/1/2026).

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I waive the Five-Year Review and choose instead to submit a tenure dossier by the deadline specified by my department/regional campus (Dean's Office due date 7/1/2026).

Faculty Signature

Date

Faculty Printed Name

Department Chair/Regional Campus Dean Signature Date